

## ISSUE SLIP STAPLED AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	8/11	70911	8/11/99
O.I.P.E. CLASSIFIER			5 8-18-99
FORMALITY REVIEW	CM	71633	8/25/99

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	14362	10/8/99
2	-	✓	7/26/04
3	-	✓	5/29-23
4	-	✓	10/14/04
5	-	✓	
6	✓	✓	
7	✓	✓	
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21	N	N	
22	N		
23	N		
24	N	N	
25	✓	✓	✓
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31		✓	✓
32	✓	✓	✓
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BEST AVAILABLE COPY  
If more than 150 claims or 10 actions  
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